

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 17, 2008 8:00 am**  
**Secretary of State**

04-17-2008 90033 038 \*\*\*\*61.25

<b>DOCUMENT # 704162</b> 1. Entity Name <b>WESTSIDE CHRISTIAN CHURCH INC AT JACKSONVILLE, FLORIDA</b>																													
Principal Place of Business <b>10123 MORMARY BLVD JACKSONVILLE, FL 32221</b>			Mailing Address <b>556 NEW BRUNSWICK TERR JACKSONVILLE, FL 32221</b>																										
2. Principal Place of Business - No P.O. Box # <b>10123 NORMANDY BLVD</b>		3. Mailing Address <b>10123 NORMANDY BLVD</b>																											
Suite, Apt. #, etc. 		Suite, Apt. #, etc. 																											
City & State <b>JACKSONVILLE, FL.</b>		City & State <b>JACKSONVILLE, FL</b>		4. FEI Number <b>59-1989441</b>																									
Zip <b>32221-</b>		Country <b>U.S.A.</b>		Applied For Not Applicable																									
Zip <b>32221</b>		Country <b>U.S.A.</b>		5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>																									
6. Name and Address of Current Registered Agent  <b>BLAKE, WILLIAM E 2119 CENTERWAY MIDDLEBURG, FL 32068</b>			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> <span><b>FL</b></span> <span>Zip Code</span> </div>																										
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.  SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reappointing)</small>																													
<b>Filing Fee is \$61.25 Due by May 1, 2008</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		<b>\$5.00 May Be Added to Fees</b>																									
<b>Make check payable to Florida Department of State</b>																													
<div style="display: flex; justify-content: space-between;"> <div style="width: 48%;"> <b>10. OFFICERS AND DIRECTORS</b> <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 15%;">TITLE</td> <td style="width: 85%;"> <b>S</b> <input checked="" type="checkbox"/> Delete  <b>COLLIER, MIKE</b>            STREET ADDRESS  <b>10345 SUGAR GROVE ROAD</b>            CITY-ST-ZIP  <b>JACKSONVILLE, FL 32221</b> </td> </tr> <tr> <td>TITLE</td> <td> <input type="checkbox"/> Delete  <b>CTD</b>  <b>HAYS, WALLY</b>            STREET ADDRESS  <b>5855 PIPER GLEN BLVD.</b>            CITY-ST-ZIP  <b>JACKSONVILLE, FL 32222</b> </td> </tr> <tr> <td>TITLE</td> <td> <input type="checkbox"/> Delete  <b>T</b>  <b>WINSTEAD, WILLIAM</b>            STREET ADDRESS  <b>1496 BLOOMINGDALE RD</b>            CITY-ST-ZIP  <b>JACKSONVILLE, FL 322216516</b> </td> </tr> <tr> <td>TITLE</td> <td> <input type="checkbox"/> Delete  <b>VCTD</b>  <b>BLAKE, WILLIAM E.</b>            STREET ADDRESS  <b>2119 CENTER WAY</b>            CITY-ST-ZIP  <b>MIDDLEBURG, FL 32068</b> </td> </tr> <tr> <td>TITLE</td> <td> <input type="checkbox"/> Delete  </td> </tr> <tr> <td>TITLE</td> <td> <input type="checkbox"/> Delete  </td> </tr> </table> </div> <div style="width: 48%;"> <b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10</b> <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 15%;">TITLE</td> <td style="width: 85%;"> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition  <b>S</b>  <b>EDWARD BROWNING</b>            STREET ADDRESS  <b>8018 JAGUAR DR.</b>            CITY-ST-ZIP  <b>JACKSONVILLE, FL 32210</b> </td> </tr> <tr> <td>TITLE</td> <td> <input type="checkbox"/> Change <input type="checkbox"/> Addition  </td> </tr> <tr> <td>TITLE</td> <td> <input type="checkbox"/> Change <input type="checkbox"/> Addition  </td> </tr> <tr> <td>TITLE</td> <td> <input type="checkbox"/> Change <input type="checkbox"/> Addition  </td> </tr> <tr> <td>TITLE</td> <td> <input type="checkbox"/> Change <input type="checkbox"/> Addition  </td> </tr> <tr> <td>TITLE</td> <td> <input type="checkbox"/> Change <input type="checkbox"/> Addition  </td> </tr> </table> </div> </div>						TITLE	<b>S</b> <input checked="" type="checkbox"/> Delete <b>COLLIER, MIKE</b> STREET ADDRESS <b>10345 SUGAR GROVE ROAD</b> CITY-ST-ZIP <b>JACKSONVILLE, FL 32221</b>	TITLE	<input type="checkbox"/> Delete <b>CTD</b> <b>HAYS, WALLY</b> STREET ADDRESS <b>5855 PIPER GLEN BLVD.</b> CITY-ST-ZIP <b>JACKSONVILLE, FL 32222</b>	TITLE	<input type="checkbox"/> Delete <b>T</b> <b>WINSTEAD, WILLIAM</b> STREET ADDRESS <b>1496 BLOOMINGDALE RD</b> CITY-ST-ZIP <b>JACKSONVILLE, FL 322216516</b>	TITLE	<input type="checkbox"/> Delete <b>VCTD</b> <b>BLAKE, WILLIAM E.</b> STREET ADDRESS <b>2119 CENTER WAY</b> CITY-ST-ZIP <b>MIDDLEBURG, FL 32068</b>	TITLE	<input type="checkbox"/> Delete 	TITLE	<input type="checkbox"/> Delete 	TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition <b>S</b> <b>EDWARD BROWNING</b> STREET ADDRESS <b>8018 JAGUAR DR.</b> CITY-ST-ZIP <b>JACKSONVILLE, FL 32210</b>	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition 	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition 	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition 	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition 	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition 
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.																													
<div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <b>SIGNATURE:</b> <u>William E. Blake</u>  <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small> </div> <div style="width: 45%;"> <u>April 15, 2008 (904) 264-1688</u>  <small>Date Daytime Phone #</small> </div> </div>																													